

# Datapoint

Information from the Division of Health Care Finance and Policy  
Massachusetts Acute Care Hospital Inpatient Discharges

Q2 FY98 (January 1 through March 31, 1998) versus Q2 FY99 (January 1 through March 31, 1999)

Argeo Paul Cellucci  
Governor

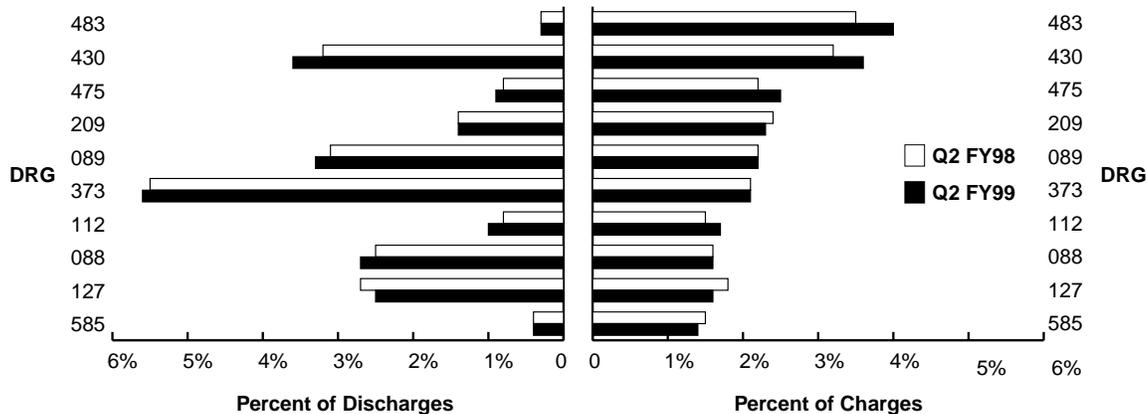
Jane Swift  
Lieutenant Governor

William D. O'Leary  
Secretary  
Executive Office of  
Health & Human Services

Division of Health Care  
Finance and Policy  
Two Boylston Street  
Boston, MA 02116  
(617) 988-3100

Louis I. Freedman  
Acting Commissioner

## Top Ten DRGs Ranked by Percent of Charges



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Note: See table below for DRG labels. DRGs are based on the 3M All-Patient Grouper, version 12, and ranked according to percent of total charges for Q2 FY99.

## Mean Charges per Discharge and Length of Stay for Top Ten DRGs

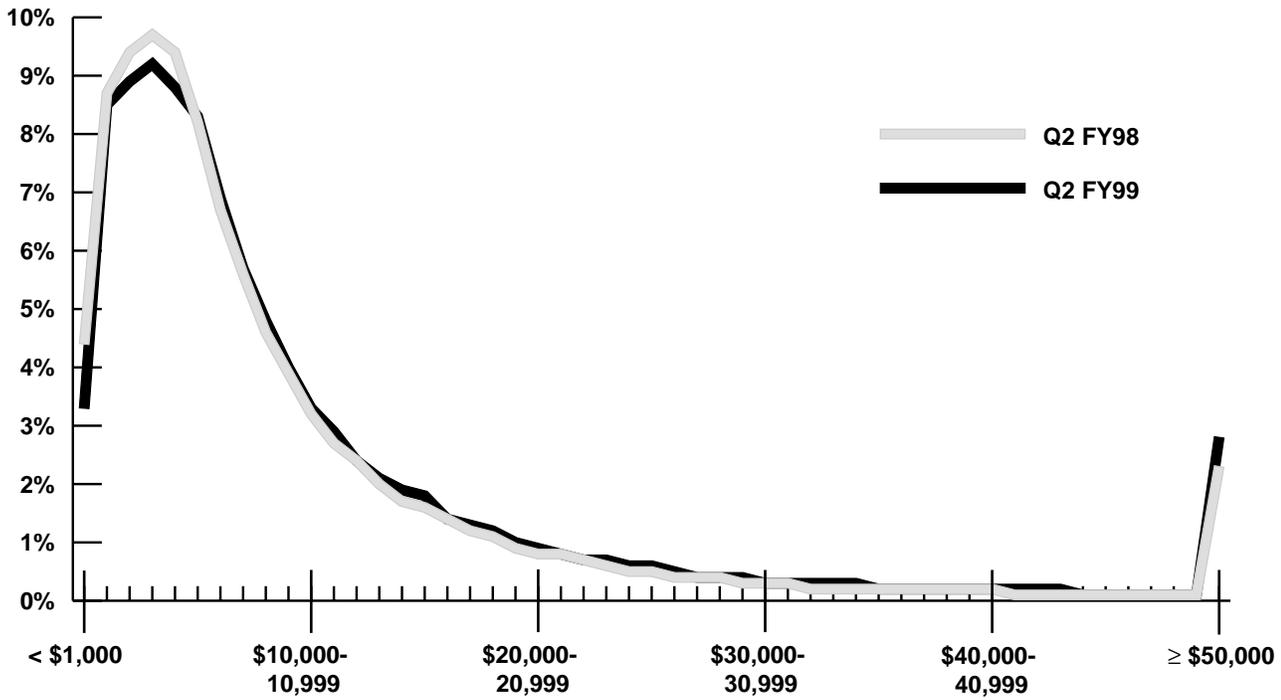
DRG	Mean Charges per Discharge		Mean LOS	
	Q2 FY98	Q2 FY99	Q2 FY98	Q2 FY99
<b>483:</b> Tracheostomy except for face, mouth and neck diagnosis	\$131,895	\$160,842	33.4	35.8
<b>430:</b> Psychoses	\$10,402	\$11,550	10.0	10.5
<b>475:</b> Respiratory system diagnosis with ventilator support	\$27,670	\$31,451	10.9	11.2
<b>209:</b> Major joint and limb reattachment procedure of lower extremities	\$18,526	\$19,347	4.5	4.3
<b>089:</b> Simple pneumonia and pleurisy age>17 with CC	\$7,646	\$7,762	5.6	5.5
<b>373:</b> Vaginal delivery without complications	\$3,954	\$4,300	2.2	2.2
<b>112:</b> Percutaneous cardiovascular procedure without AMI	\$18,880	\$20,443	2.3	2.2
<b>088:</b> Chronic obstructive pulmonary disease	\$6,826	\$7,013	5.0	4.9
<b>127:</b> Heart failure and shock	\$7,015	\$7,416	4.8	4.8
<b>585:</b> Major stomach, esophageal, duodenal, small and large bowel procedure with major CC	\$41,718	\$45,738	15.5	15.5

Note: AMI = acute myocardial infarction, CC = complications or comorbidities

### What is Datapoint?

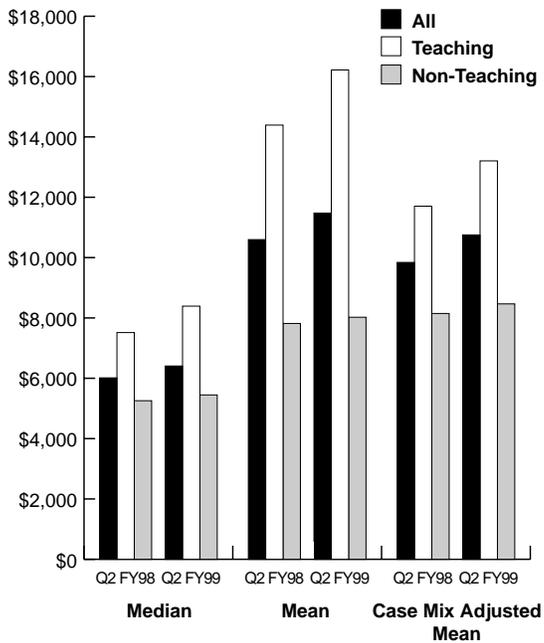
Datapoint is a quarterly publication that highlights the most current information available about the Massachusetts short stay acute care hospital industry. To obtain additional copies, please contact the Division of Health Care Finance and Policy Office of Communications at (617) 988-3125. To share your comments and suggestions for future editions, or to discuss technical questions, please contact Kathleen Fuda at (617) 988-3191 or by email at kathy.fuda@state.ma.us.

## Distribution of Total Charges per Discharge

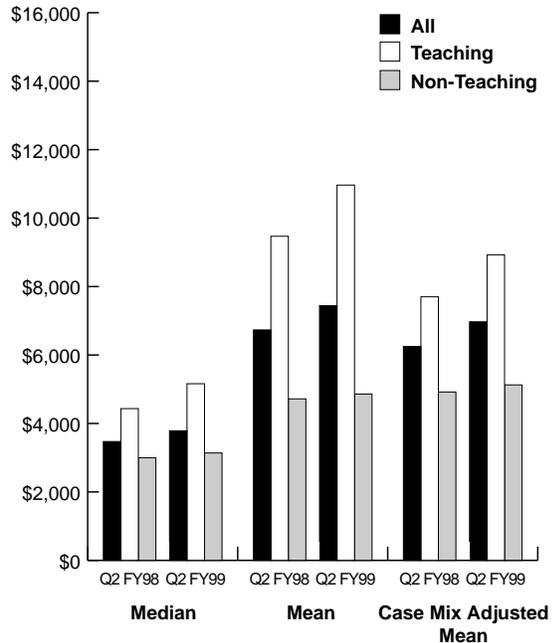


Note: Lines represent percent of discharges in each \$1,000 charge interval.

## Total Charges per Discharge

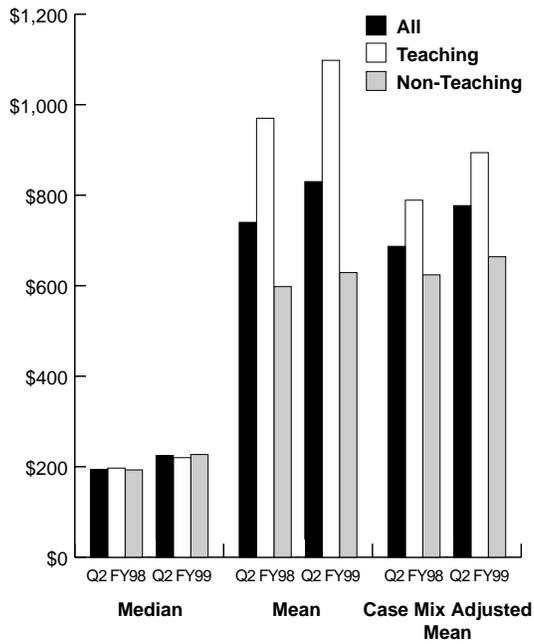


## Ancillary Charges per Discharge

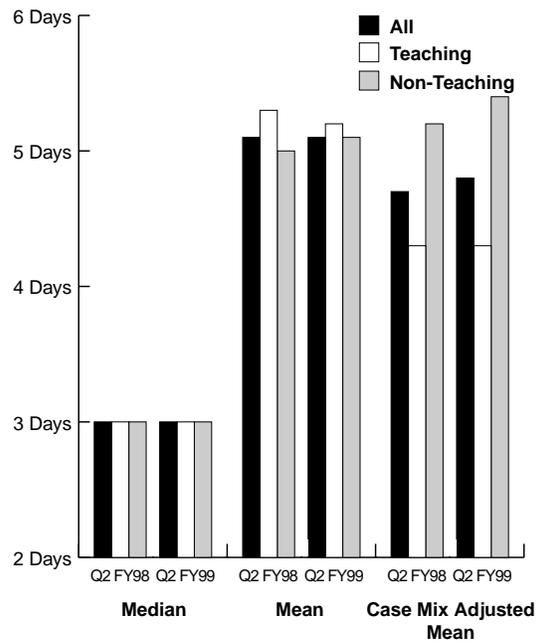


Note: Ancillary charges include all charges except those for routine and special accommodations.

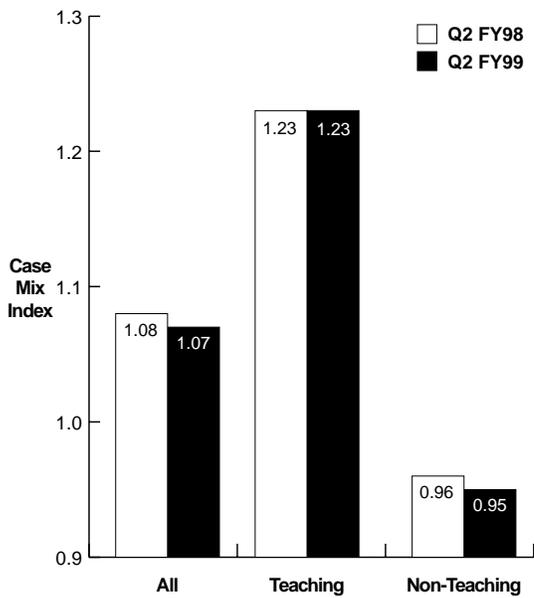
### Pharmacy Charges per Discharge



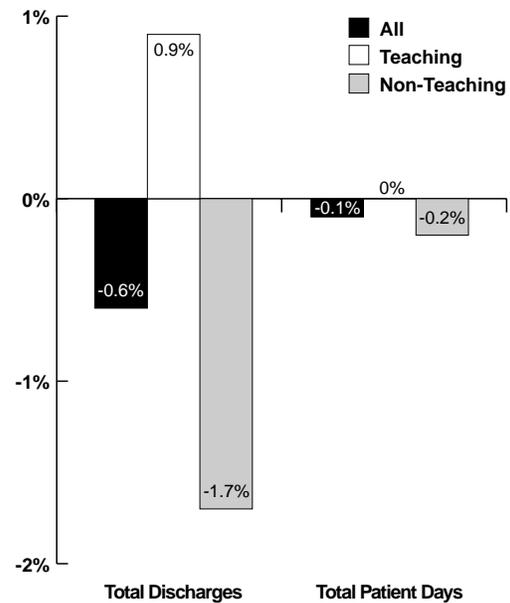
### Length of Stay



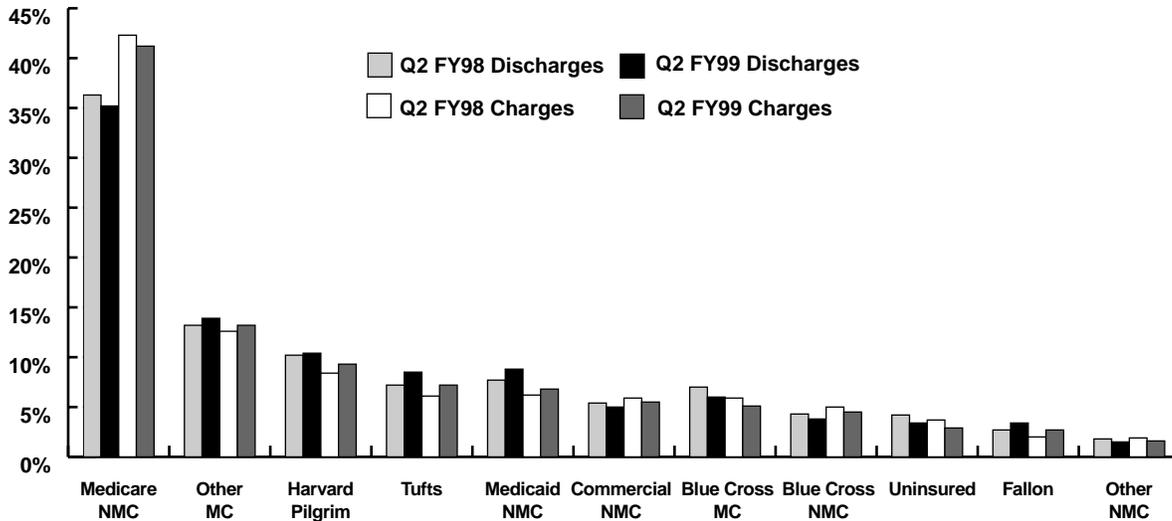
### Case Mix Index



### Percent Increase in Discharges and Days (Q2 FY98 to Q2 FY99)

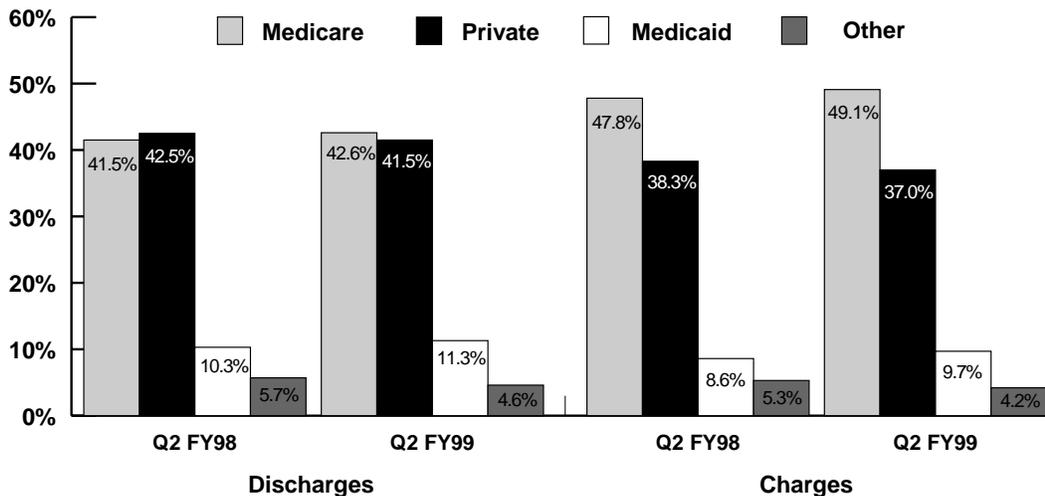


## Payer Categories by Percent of Discharges and Charges



Note: Ranked by percent of total charges statewide Q2 FY99. MC = managed care. NMC = non-managed care. "Other MC" includes Health New England, US Healthcare, Medicaid primary care clinician, Massachusetts Behavioral Health Partnership, other HMOs, PPOs, and POSs. "Other NMC" includes: Workers' Compensation and other government payment.

## Government and Private Payers by Percent of Discharges and Charges



Note: "Other" includes workers' compensation and other government payment.

### Endnotes

Statistics for the second quarter of FY99 (01/01/99 to 03/31/99) are based on short stay acute hospital inpatient discharge data received as of 7/09/99; some data that failed DHCFCP edits have been included. Sixty-eight of 80 Massachusetts short stay acute care hospital campuses are included in the analysis including 15 of 20 teaching hospitals and 53 of 60 non-teaching hospitals. These hospitals account for approximately 82% of discharges and days and 83% of total charges statewide. Statistics for Q2 FY98 are based on data from all Massachusetts short stay acute care hospitals which have passed DHCFCP edits. Statistics for the current quarter will be updated on our website ([www.state.ma.us/dhcfp](http://www.state.ma.us/dhcfp)) when complete data are available.

The following hospital campuses are categorized as teaching hospitals: Baystate, Berkshire, Beth Israel, Boston Medical Center, Brigham and Women's, Cambridge, Carney, Children's, Dana Farber, Deaconess, Faulkner, Lahey, Mass. Eye and Ear, Mass. General, Memorial, Mount Auburn, New England Medical Center, Saint Elizabeth, Saint Vincent, University of Mass.

Charges are not inflation-adjusted and do not represent costs or payments.

Case mix index is calculated using Massachusetts cost weights (base year = FY93) for the 3M All-Patient Grouper, version 12.

Staff for this publication:

Kathleen K. Fuda  
Maxine Schuster  
Michelle Anderson  
Maria Schiff  
Heather Shannon